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Commissioner Karen Weldin Stewart Vows Vigorous Review

(DOVER, DE) Commissioner Karen Weldin Stewart announced today that she has received rate request filings from Highmark Blue Cross Blue Shield of Delaware and Aetna, Inc. for individual and small group plans to be offered on Delaware's Health Insurance Marketplace in 2016. Highmark is asking for a 25.4% increase in the individual market, while Aetna requests a 16% increase. In the small group market, Highmark seeks a 12.7% increase, while Aetna asks for a 6.1% decrease.

"Large rate increase requests like these are occurring in several states across the country and I know they will cause a hardship for many Delawareans," said Stewart. "The increases are substantial and I'm going to do my best to reduce them. I am instructing my actuaries to examine vigorously Highmark's and Aetna's supporting data for the requests."

Commissioner Stewart also announced that the Insurance Department will conduct public information sessions in June to receive comment on the proposed rate increases. The sessions will take place at the following locations in the three counties:

Monday, June 15 6:00pm Insurance Department, 841 Silver Lake Blvd., Dover

Tuesday, June 16 6:00pm Carvel State Office Building, 820 N. French St. Wilmington

Representatives from Highmark and Aetna will be present at each session. Consumers and interested parties may also submit written comments to the Department at <a href="mailto:ratedivision@delaware.gov">ratedivision@delaware.gov</a> for 30 days between June 15 and July 15, 2015.

According to Title 18 of the Delaware Code, insurance companies may not charge rates that are "excessive, inadequate or unfairly discriminatory." The staff at DOI reviews rate filings and independent actuaries retained by DOI review the supporting data to see if the rate changes are justified by the circumstances as presented by the insurance companies. The rate requests and the insurers' justifications will be posted at <a href="https://www.delawareinsurance.gov">www.delawareinsurance.gov</a> during the 30-day comment period. The Commissioner reviews the actuaries' findings and the public comment and works with the insurers to arrive at a rate. That rate is submitted to the Centers for Medicare & Medicaid Services (CMS) for subsequent review. CMS must follow its own regulations and Delaware law before finally approving or denying the requests.

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